FORM D

State:

constitutes a part of this notice and must be completed.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## **FORM D**

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY



06060886

Name of Offering ( check if this is an amendment and name has changed, and indicate ch	nange.)
Warrant to Purchase Preferred Stock	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505	Rule 506 Section 4(6) ULOE
Type of Filing: ☑ New Filing ☐ Amendment	
A. BASIC IDENTIFICATION DA	TA PHUULLUED
1. Enter the information requested about the issuer	DISTE P A VOIA
Name of Issuer ( check if this is an amendment and name has changed, and indicate cha	·
BridgeLux, Inc.	THOMSON
Address of Executive Offices (Number and Street, City, State, Zip Co	ode) Telephone Number (finelluding Area Code)
1225 Bordeaux Drive, Sunnyvale, CA 94089	(408) 329-5300
Address of Principal Business Operations (Number and Street, City, State, Zip Co	ode) Telephone Number (Including Area Code)
(if different from Executive Offices) same	same
Brief Description of Business	
Developer and provider of high power indium gallium nitride light emitt	ting diodes
Type of Business Organization	MECD B.D.C
☑ corporation ☐ limited partnership, already formed ☐ other (please sp	ecify):
☐ business trust ☐ limited partnership, to be formed	nct 2 <b>5</b> 2006
Month Year	
Actual or Estimated Date of Incorporation or Organization:	Actual D Estimated 1086
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviati	ion for State:
CN for Canada; FN for other foreign jurisdiction	
GENERAL INSTRUCTIONS	
Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under 15 U.S.C. 77d(6).	er Regulation D or Section 4(6), 17 CFR 230.501 et s
When To File: A notice must be filed no later than 15 days after the first sale of securities	in the offering. A notice is deemed filed with the U
Securities and Exchange Commission (SEC) on the earlier of the date it is received by the	SEC at the address given below or, if received at the
address after the date on which it is due, on the date it was mailed by United States registered	
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washingto Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be filed with the SEC, one of which must be filed with the SEC, one of which must be filed with the SEC, one of which must be filed with the SEC.	
must be photocopies of the manually signed copy or bear typed or printed signatures.	or our managery organical variety organical
Information Required: A new filing must contain all information requested. Amendments not changes thereto, the information requested in Part C, and any material changes from the information he Appendix need not be filed with the SEC.	eed only report the name of the issuer and offering, a nation previously supplied in Parts A and B. Part E a
Filing Fee: There is no federal filing fee.	

ATTENTION

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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	A. BASIC IDEN	TIFICATION DATA		
<ul> <li>2. Enter the information requested for the formation between the issuer, if the issuer.</li> <li>Each beneficial owner having the powing the issuer;</li> <li>Each executive officer and director of</li> </ul>	er has been organized within er to vote or dispose, or dire	ct the vote or disposition o		
Each general and managing partner of	partnership issuers.	orate general and managin	g partiters of parti	icromp issuers, and
Check Box(es) that Apply:   Promoter	□ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Walker, Robert				
Business or Residence Address (Number and	Street, City, State, Zip Code)		<u> </u>	
1225 Bordeaux Drive, Sunnyvale, C				
Check Box(es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Liu, Heng				
Business or Residence Address (Number and	Street, City, State, Zip Code)			
1225 Bordeaux Drive, Sunnyvale, C	A 94089			
Check Box(es) that Apply:   Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Fan, Gloria				
Business or Residence Address (Number and	Street, City, State, Zip Code)	)		
1225 Bordeaux Drive, Sunnyvale, C	CA 94089			
Check Box(es) that Apply:   Promoter	□ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Moran, Peter				
Business or Residence Address (Number and	Street, City, State, Zip Code)			
1225 Bordeaux Drive, Sunnyvale, C	CA 94089			
Check Box(es) that Apply: ☐ Promoter	□ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Irwin, M. Scott				
Business or Residence Address (Number and	Street, City, State, Zip Code			
1225 Bordeaux Drive, Sunnyvale, C	A 94089			
Check Box(es) that Apply:   Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
DCM IV, L.P.				
Business or Residence Address (Number and	Street, City, State, Zip Code)	)		
2420 Sand Hill Road, Suite 200, Me	nio Park, CA 94025			
Check Box(es) that Apply: ☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
El Dorado Ventures VI, L.P.				
Business or Residence Address (Number and	Street, City, State, Zip Code)			
2440 Sand Hill Road, Suite 200, Me	nlo Park, CA 94025			

	A. BASIC IDENTI	FICATION DATA		
<ul> <li>Enter the information requested for the f</li> <li>Each promoter of the issuer, if the iss</li> <li>Each beneficial owner having the povthe issuer,</li> <li>Each executive officer and director of</li> </ul>	uer has been organized within ver to vote or dispose, or dire Corporate issuers and of corp	et the vote or disposition o		
• Each general and managing partner of Check Box(es) that Apply:   Promoter	f partnership issuers.  Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
Full Name (Last name first, if individual)		<del> </del>		Managing Partner
Harris & Harris Group, Inc.		ي مست	vi r	فقهفوتمون ريد تتاب
Business or Residence Address (Number and	Street, City, State, Zip Code)			
111 West 57th Street, Suite 1100, N				
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code)	)		
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		÷		
Business or Residence Address (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)	, .			
Business or Residence Address (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		,		
Business or Residence Address (Number and	Street, City, State, Zip Code)			
Check Box(es) that Apply:   Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				<u> </u>
Business or Pasidanca Address (Number and	Street City State 7in Code)	#*		

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1.	Has	s the	issue	er sole	d, or o	ioes	the iss A	uer in nswer	tend to	o sell, n App	to nor sendix	-acci	edited umn 2	l inve: , if fil	stors in	ı this der L	offeri JLOE.	ng?					Ε	<b>.</b>	×
2. What is the minimum investment that will be accepted from any individual?												\$_		N/A											
3. Does the offering permit joint ownership of a single unit?												-	es 🗷	No □											
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any												_	. —												
<b>4.</b>	lf a	nmis pers states	sion son to s, list	or sir o be l the n	nilar isted ame (	remu is an of the	inerati assoc e brok et forth	on for lated p er or d	solici serson lealer.	tation or ag If me	of pu ent of ore tha	rchas a bro n fiv	ers in ker or e (5) p	conno deale erson	ection er regi: s to be	with sterec	sales ( I with	of sec the S	urities EC an	s in th ≀d/or v	e offer vith a s	ing. state			Ae ·
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Name	of A	Asso	ciate	d Bro	ker o	· Dea	aler		•																
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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and			
	already exchanged.	Aggregate		int Already
	Type of Security	Offering Price	e	Sold
	Debt	\$	³	<del>-</del> -
	Equity	\$	<u> </u>	
	☐ Common ☐ Preferred	07 500	_	07 500
	Convertible Securities (including warrants) Warrant to Purchase Preferred Stock*	\$87,500	\$	87,500
	Partnership Interests	<u>\$</u>	\$	
	Other (Specify)	\$	\$	
	Total	\$ 87,500	\$	87,500
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Doll: of I	ggregate ar Amount Purchases
	Accredited Investors	1	s	87,500
	Non-accredited Investors	0		0
	Total (for filings under Rule 504 only)		\$	<u> </u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Type of	Doll	ar Amount
	Type of offering	Security	Don	Sold
	Rule 505		\$	
	Regulation A		<b>s</b>	
	Rule 504		<b>S</b>	
	Total		\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	
	Printing and Engraving Costs		<u>s</u>	
	Legal Fees	X	\$	5,000
	Accounting Fees		\$	<del> </del>
	Engineering Fees		\$	···
	Sales Commissions (specify finders' fees separately)		\$	
	Other Expenses (identify) (blue sky filing)	ra e	<b>S</b>	300
	Total	×	<b>S</b>	5,300

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

<sup>\*</sup> Includes Preferred Stock issuable upon exercise of the Warrant and the Common Stock issuable upon conversion of the Preferred. The Warrant has not been exercised.

	D. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES AN	<u>v</u>	USE OF PRO	UEEL	<u> </u>	
	b. Enter the difference between the aggregate offe Question 1 and total expenses furnished in response to the "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference is	S			\$_	82,200
5.	Indicate below the amount of the adjusted gross proceed for each of the purposes shown. If the amount for any and check the box to the left of the estimate. The to adjusted gross proceeds to the issuer set forth in respons	purpose is not known, furnish an estimat tal of the payments listed must equal th	te				
				Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and fees		כ	s	_ D	S-	
	Purchase of real estate		)	s	_ 🗆	<b>S</b> -	
	Purchase, rental or leasing and installation of mach	inery and equipment	)	\$	_ 🗆	<b>\$</b> -	
	Construction or leasing of plant buildings and facil	ities	3	\$	_ 🗆	<b>\$</b> -	
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset pursuant to a merger)	s or securities of another issuer	3	\$	<del>-</del> 0	<b>\$</b> -	
	Repayment of indebtedness		)	\$ <del></del>	- 0	<b>S</b> -	
	Working capital		3	\$	_ 🗵	<b>S</b> _	82,200
	Other (specify):			\$			
			1	S	_ n	۲.	
	Column Totals		1	•	_ _ 🗷	_	82 200
	Total Payments Listed (column totals added)	82,20	00				
	D.	FEDERAL SIGNATURE					<del></del>
sigr	issuer has duly caused this notice to be signed by the u ature constitutes an undertaking by the issuer to furnish rmation furnished by the issuer to any non-accredited in	ndersigned duly authorized person. If thi to the U.S. Securities and Exchange Cor	mr	nission, upon wri	der Ru itten re	le 5 que	05, the following st of its staff, the
Issu	er (Print or Type)	Signature			Date	:	
	idgeLux, Inc.	(lm/2			10	<u>,                                    </u>	<u>^</u> / 06
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)			<u> </u>		
GI	oria Fan	Chief Financial Officer					
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\_ ATTENTION \_

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)